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ABSTRACT

For Kung hunter-gatherers and Fijian fishing people, healing is a central community ritual with significance beyond the cure itself. An enhanced state of consciousness, experienced most intensely by the healer, but also shared by the community, is at the core of Kung and Fijian healing. Although in contemporary Euro-American culture the spiritual is considered a separate or separable dimension, and healing a separate or separable role, data from these cultures describe a situation where the spiritual is inseparable from other aspects of life. A transformational model based on the role of the healer in these two cultures might also be applicable to understanding processes of education, community, and development in other cultures by emphasizing transitioning rather than stages achieved, and process and experience rather than structure. To apply such a model to Western cultures would mean major changes in world view, moving to a synergistic view of the world, rather than one based on the ideas of scarcity and fragmentation. (IS)

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Healing and Transformation:

Perspectives on Development, Education and Community

Richard Katz

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I. Introduction

Among the !Kung hunter-gatherers of the Kalahari Desert and the farming fishing people of the outer Fiji Islands, healing is a central community ritual with significance far beyond effecting a cure. In this article I present field data on healing in these two cultures. The data support a definition of healing as "a process of transitioning toward meaning, balance, connectedness and wholeness"(Katz, 1982b).

The data also suggest that the study of psychological healing provides special insights into processes of psychological development, education, and community, offering a transformational model.[2] An enhanced state of consciousness, experienced most intensely by the healer, but also shared by the community, is at the core of !Kung and Fijian healing. That enhanced state brings on a sense of connectedness between a spiritual healing power, the healers, and their community. Continual transitioning is the developmental pattern, as the relationship to power is in dynamic flux. The enhanced consciousness establishes the possibility of healing but does not remove healers from the context of daily life. Access to this healing power becomes significant only with its application within the daily life of the community. The healer serves as a vehicle to channel healing to the community, without accumulating power for personal use. The transformational model involves the experience of both accessing the enhanced state of consciousness and applying it within the community.

Individuals and communities which seek healing are often in the midst of crises, confusion, or a search for fulfillment (Katz, 1982b). In their vulnerability and openness to change, they reveal their fears and hopes.

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These fears and hopes are the context for the healing transition; their resolution or fulfillment, the aim of that transition[3]. Not only is healing a source of insight about human nature; it is also a vehicle for actualizing human potential (Bourguignon, 1973, 1979; Durkheim, 1915; Katz, 1982b; Levi-Straus, 1963; LeVine, 1979; Van Gennep, 1960). Focusing as it does on vulnerability, healing deals with a critical link in the actualization of that potential, and thus with paradigmatic issues in community and individual development.

Healing also involves central tasks of psychological development, such as defining reality and making meaning; it is not merely confined to curing sick people. Focusing as it does upon the more intense disruptions and integrations in that reality-definition and meaning-making, healing can thus be studied as a paradigmatic developmental process. Among the !Kung and the Fijians, the process of becoming a healer exemplifies the process of healing itself; the key to both is an experience of transformation which benefits the community. As healers intersect with situations of crisis and opportunity in their efforts to construct reality and work on the dynamics of cultural balance, their education and development become inseparable processes. Thus healing can offer a paradigm for education.

The !Kung and Fijian data in particular provide further support for considering healing in this paradigmatic fashion. The !Kung data offer a special evolutionary perspective. When I did field-work with the !Kung, they were living primarily as hunter-gatherers, a mode of adaptation rare today, though <u>representative</u> of what was the universal pattern of human existence for 99% of cultural history (Lee and DeVore, 1968). During that huge span of history, it is believed, basic patterns of human adaptation evolved (Lee and DeVore 1968). Lee (1979) goes as far as to say that "basic human social forms,

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language and human nature itself were forged" during that span (p. 1). A study of !Kung healing may suggest principles fundamental to human healing and development, shedding light on their origins and evolution[4].

Furthermore, !Kung and Fijian healers are teachers, generating and conveying the culture's central mysteries and wisdom. They are highly respected and viewed as approximating cultural ideals as they participate in the healing process and manifest the healing power. The healers are respected as guardians of the culture's ultimate powers, not for their personal achievements. Their transformation represents an ideal of development for the culture.

The concept of healing explored in this chapter suggests a transformational model which can be applied to understanding processes of education, development and community. The model is directly relevant to the healing enterprise, while offering an implicit generic perspective. For example, "education as transformation" describes a model of healer education, while offering a generic perspective on education. The transformational model emphasizes psychological and social transitioning and the sharing of valued resources, in striking contrast to comparable models which predominate in contemporary Euro-American culture with their emphasis on linear stage-wise progressions and the individual competition for and accumulation of valued resources.

While the cross-cultural relevance of this transformational model must be established with extreme care, the model presents[5] an alternative to Euro-Western approaches which seems worth consideration. The healing transition is an important key to a society's dominant issues in human potential; the transformational model suggests ways a society can encourage the

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communual generation and utilization of valued resources, which Rappaport (1978) posits as critical for the survival of the human species.

II. Ethnographic Data

The field-data presented are drawn from two studies of community healing systems: a three-month study in 1968 among the Kalahari !Kung (e.g. Katz, 1982b); and a twenty-two month study in 1977-78 on the outer Fiji Islands (Katz, 1981). Standard ethnographic methods, including participant observation, spot observation, and interviewing were used. In addition, psychological tests were given to matched samples of healers and non-healers to delineate specific healer characteristics, and survey questionnaires were given to community members to delineate characertistics of social organization.

A. Accepting Boiling Energy: Transformation and Healing Among the !Kung

In Botswana, Namibia and southern Angola there are about 50,000 San people, of whom some 5,000 live primarily as hunter-gatherers. The fieldwork for this paper occurred among a group of nearly 500 !Kung-speaking San, living as hunter-gatherers in the northwestern Kalahari Desert, Botswana[1].

The economic system of the !Kung is based on sharing collected food resources (Lee, 1979; Lee and DeVore, 1976; Marshall, 1976). Local groups do not maintain exclusive rights to resources or defend territories; a reciprocal access prevails. Frequent visiting among different groups mitigates the effect of localized shortages. Allied groups cooperate, coming together in a given area, living apart when sources of food and water are widely scattered.

Resources of all kinds circulate among members of a camp and between camps, so that any one person draws upon resources far beyond his or her capacity. Little investment in a capital sector of the economy is necessary;

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elements of the material culture are easily made, with ample leisure time to make them. Since individuals must move around to get food, personal property is minimal, usually less than 25 pounds per adult (Lee, 1979). The environment itself acts as a storehouse. There is a marked absence of disparities in wealth and possessions among the !Kung. Egalitarianism is the rule (Lee, 1979).

The primary ritual among the !Kung, the all-night healing dance, epitomizes these characteristics of sharing and egalitarianism (Katz, 1981, 1982a, 1982b; Lee, 1968; Marshall, 1969). In the crucible of intense emotions and the search for protection which is the healing dance, sharing and egalitarianism are put to the test, relied upon as vehicles for survival. The healing power, or n/um, is the most valued resource at the dance, and one of the most valued resources in all community life (Katz, 1982b). It is released by the community and, through its healing effects, helps to recreate and renew that community. Though "strongest" at the dance, n/um has a primary significance throughout the !Kung universe of experience. Its existence and functioning harmonize with and help maintain !Kung life.

!Kung healing involves health and growth on physical, psychological, social and spiritual levels; it affects the individual, the group, the surrounding environment and the cosmos. Healing is an integrating and enhancing force, far more fundamental than simple curing or the application of medicine.

Sometimes as often as four times in a month, the women sit around the fire, singing and rhythmically clapping as night falls, signaling the start of a healing dance. The entire camp participates. The men, sometimes joined by the women, dance around the singers. As the dance intensifies, n/um

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("energy") is activated in those who are healers, most of whom are among the dancing men. As n/um intensifies in the healers, they experience !kia ("a form of enhanced consciousness") during which they heal everyone at the dance. The dance usually extends far into the night, often ending as the sun rises the next morning. Those at the dance confront the uncertainties of their experience, and reaffirm the spiritual dimension of their daily lives. "Being at a dance makes our hearts happy," the !Kung say.

A healer talks about the !kia experience:

> "You dance, dance, dance, dance. Then n/um lifts you in your belly and lifts you in your back . . . N/um makes you tremble, it's hot. . . . When you get into !kia, you're looking around because you see everything, because you see what's troubling everybody . . . " (Katz, 1982b, p.42).

Held in awe, n/um is considered very powerful and mysterious. As healers learn to control their boiling n/um, they can apply it to healing. They learn to heal, to "see the sickness and pull it out."

A powerful healer spoke of the feeling !kia gives, that of becoming more essential, more oneself: "I want to have a dance soon so that I can really become myself again." A transcendent state of consciousness, !kia alters a !Kung's sense of self, time and space. !Kia makes healers feel they are "opening up" or "bursting open, like a ripe pod."

Through !kia, the !Kung transcend ordinary life and can contact the realm of the gods and the spirits of dead ancestors. Sickness is a process in which the spirits try to carry a person off into their realm. In !kia, the healer expresses the wishes of the living to keep the sick person with them and goes directly into the struggle with the spirits. The healer is the community's emissary in this confrontation. When a person is seriously ill, the struggle

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intensifies. If a healer's n/um is strong, the spirits will retreat and the sick one will live. This struggle is at the heart of the healer's art, skill and power. In their search for contact with transcendent realms and in their struggle with illness, misfortune and death, the healing dance and n/um are the !Kung's most important allies.

Fiercely egalitarian, the !Kung do not allow n/um to be controlled by a few religious specialists, but wish it to be spread widely among the group. All young boys and most young girls seek to become healers. By the time they reach adulthood, more than half the men and 10% of the women have become healers. Still there is no stigma attached to those who do not become healers. An unlimited energy, n/um expands as it boils. It cannot be hoarded by any one person. The !Kung do not seek !kia for its own sake, but for its healing protection. At the healing dance, n/um is shared by everyone, all are given healing. As one person experiences !kia at the dance, others likely will follow. Though !kia may be experienced most intensely in the healers, they are channels to aid in the distribution of n/um to those at the dance.

The dance provides healing in the most generic sense: it may cure an ill body or mind, as the healer pulls out sickness with a laying on of hands; mend the social fabric, as the dance promotes social cohesion and a manageable release of hostility; protect the camp from misfortune, as the healer pleads with the gods for relief from the Kalahari's harshness; and provide opportunities for growth and fulfillment, as all can experience a sense of well-being and some, a spiritual development.

These integrated functions of the dance reinforce each other, providing a continuous source of curing, counsel, protection and enhancement. The healing dance is woven into !Kung hunting-gathering life without undermining

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the execution of everyday responsibilites. Healers are first and foremost hunters and gatherers, their primary obligation being to help in subsistence activities. A public, routine cultural event to which all have access, the dance establishes community, and it is the community, in its activation of n/um, which heals and is healed.

To heal depends upon developing a desire to "drink n/um", not on learning a set of specific techniques. Teaching focuses upon helping students overcome their fear, helping them to regulate the boiling n/um and resultant !kia so that healing can occur. The n/um must be hot enough to evoke !kia, but not so hot that it provokes debilitating fear. Accepting boiling energy for onself is a difficult process because n/um, painful and mysterious, is greatly feared. The healer's education stresses not the structure of the dancing, but the importance of dancing so one's "heart is open to boiling n/um"; it emphasizes not the composition of the healing songs, but singing so that one's "voice reaches up to the heavens."

The experience of !kia brings profound pain and fear, along with feelings of release and liberation. N/um feels "hot, like a fire that is inside." A respected healer described another dimension of this fear: "As we !Kung enter !kia, we fear death. We fear we may die and not come back!" When potential healers can face the fact of death and willingly die, they can overcome fear of n/um, and there can be a breakthrough to !kia. An older healer talks about this death and rebirth:

> "(In !kia) your heart stops. You're dead. Your thoughts are nothing. You breathe with difficulty. You see things, n/um things; you see spirits killing people. You smell burning, rotten flesh. Then you heal, you pull sickness out. You heal, heal, heal. Then you live. Your eyeballs clear and you see people clearly" (Katz, 1982b, p. 45).

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The process which teaches the !Kung to become healers, also supports their continual efforts at healing. It is a process of education which engages the community.

Healers are similar to nonhealers in a broad range of social, economic and political variables. While healers are not a privileged group, they do differ psychologically from non-healers in ways that both prepare them for the healing work and result from that work (Katz, 1982b)[6]. It is a distinction they are meant to carry within. "We (!Kung) are not meant to boast of our healing. It is . . . something we do to help others."

B. Traveling the Straight Path: Healing and Transformation Among the Fijians

The island nation of Fiji, consisting of 100 inhabited islands and 500,00 people, is situated in the South Pacific, north of New Zealand. Approximately 50 percent of the population is indigenous; the rest descended from emigrants from southern India, who came as indentured servants more than 100 years ago. The field-data on healing deals only with indigenous Fijian culture in the rural outer islands, where people live in villages of about 100 located several hours from each other by foot.

Fijians live primarily by subsistence farming and fishing (Sahlins, 1962; Nyacakalou, 1975, 1978; M. Katz, 1981). A village consists of several groups of closely related kin who jointly own land and choice fishing areas, often working them communally. Sharing of resources is highly valued. When Fijians sit down to eat, their doors must remain open. When anyone passes by, they call out, "Please come in and eat." Fijian social structure is hierarchical, but humility, regardless of status, is valued.

Ceremonial life is essential in Fiji, promoting economic and social

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exchange and celebrating the religious dimension (Thompson, 1940; Spencer, 1941; Ravuvu, 1976). Three main elements characterize Fijian ceremonies generally and the healing ceremony in particular (Katz, 1981): the Yu ("ancestors"); the mana ("spritual power"); and the vagona ("a plant with sacred use") that brings this power to humans[7]. Mana, the ultimate power, is an invisible, irreducible force that "makes things happen." As Fijians say, "Mana is mana," and its effects are often described as miraculous.

Fijians conceive of sicknesses in two major categories, with different etiologies. The "true" or "real" sicknesses are caused by natural events. For example, one may have painful joints from being in the cold ocean too long while net-fishing. The second type, "spiritual" sicknesses, are caused either by witchcraft or by some violation of cultural norms, punished directly by the ancestors. While Fijians may seek Western medicine for treating "true sicknesses," both true and spiritual sicknesses are brought to the traditional Fijian healers. The same symptom pattern often can express either etiology.

In times of doubt, crisis, or illness, the spiritual healer is the primary community resource[8]. No problem is excluded from his or her domain, but the majority of cases are illnesses with accompanying physical symptoms. Requests for help range from a boy with a swollen neck, to a childless woman who wishes to become pregnant, to a family seeking protection against other's evil intentions, to an entire village wanting to make amends for violating a sacred custom. As one villager remarked about the spiritual healer in her village: "He can't get sick, because without him, we would all be lost." Compared to non-healers, healers are rated as significantly more "respected" and "hard working" and closer than most to the "ideal Fijian"; they remain fully contributing community members.

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The healing ceremony, centering around the ritual exchange of yaqona, typically begins when the client comes to the healer with a request for help whether it be for protection or cure. The client incorporates the request within a ritual presentation of yaqona to the healer. The healer accepts the yaqona on behalf of the ancestors from whom he or she draws healing power. Yaqona may be prepared with water and drunk by the healer, but that is not necessary. In that very act of acceptance, the critical initial exchange between healer and client is completed, and the healing is accomplished. In that moment, the mana is said to become available, making possible accurate diagnosis and selection of an effective treatment. The client returns after four days for the conclusion of the treatment, or, if needed, further treatment in the same or some new direction. Herbs and massage are used in about 20 percent of the instances to carry out the healing.

Mana, like n/um, is the most valued resource in the healing ceremony and one of the most valued in community life generally. It is omnipresent. Though meant for the protection and healing of humans, mana can be turned to opposite purposes. Only by following the _gaunisala dodonu_, the "straight path", can persons direct mana toward healing. The path itself is not straight, but the way one travels it should be. The path is discovered by traveling it.

Traveling the straight path means living out attributes that characterize the ideal Fijian. The straight path provides a concept of ideal development for all Fijians, an aim pursued with special intensity by healers. The education of healers is an education for living in an ideal manner, and thus becomes a paradigm for education in and of the community.

The following attributes are often mentioned when prescribing the way a

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healer must live in order to follow the straight path: telling and living the truth (dauvakadina); love for all (daulololoma), so that all who come receive help; proper or traditional behavior (i tovo vinaka); humility (sega ni vukivuki); respect for others and tradition (vakarokoroko); single-mindedness (sega ni lomaloma rua); and service (veiqaravi), so that the power is used only to heal and not for personal gain. Though these attributes are often phrased in terms of the healing work per se, they generally prescribe the way a healer, and by extension all Fijians, must live. Together, they constitute character.

While being the source of character, traveling the straight path simultaneously challenges character. The education of the healer deals with subtle movements back and forth along dimensions of character, at increasingly demanding levels. The movement itself releases increasingly potent healing power. The healer's character creates the possibility of healing work, and the development of character marks the continuation and deepening of that work. Information about healing techniques is available only to those with character. There is respect for the technical aspects of healing, but character precedes and provides the context for healing technology.

The healer is constantly tested to betray the attributes that define the path. Increased healing power is determined by how one meets increasingly severe tests. For example, a healer's gain in power must be set within a reciprocating process whereby the community likewise gains in power.

A first vision lays the foundation of the healing work -- the connection with the ancestor who will be the source of power, and the commitment to use that power for healing. It inspires the appearance of the path and sets in motion a life-long process which is more than carrying out the intent of the first healing vision. A continuous re-creating and re-shaping of that initial

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vision into an unfolding life pattern is required. That process involves advice and instruction from a teacher, if there is one; subsequent visions; lessons learned from one's patients; and most of all the actual practice of healing and learning to live with that practice in one's community.

A common metaphor of the straight path is that of a path cut by hand with a bush-knife through the heavy underbrush of the Fijian forests. In creating the path one must follow, dead-ends and shortcuts, torturously difficult passages and relatively easy ones cause the person's movement to fluctuate in rhythm and speed, sometimes circling back on itself.

III. Toward a Transformational Model

From the data on healing among the !Kung and the Fijians we can extrapolate models of psychological development, education, and community, at whose crux are transformational experiences. For the !Kung, these experiences are epitomized in the process of "accepting boiling energy;" for the Fijians, in the process of "traveling the straight path."[8] One expression of this transformation is a dramatic enhanced-state-of- consciousness, such as !kia; but the transformational experience can also unfold during more subtle shifts in consciousness within the context of ordinary life events. Whether in its dramatic or ordinary context, transformation brings on an experience of reality in which the boundaries of self and social organization become more permeable to contact with a transpersonal realm. Accessing the enhanced state of consciousness and applying its effects within the community combine to constitute the transformational experience.

These transformational experiences can be said to unfold within and into a transformational model of psychological development (Katz and Kilner, in

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press); to be guided by a transformational model of education -- "education as transformation" (Katz, 1981); and to be structured by a transformational model of community -- "synergistic community" (Katz, 1983/4). In fact, there is one transformational model, which, as it is applied to the areas of development, education and community, interrelates those areas: education and development merge, and community is a stimulant for as well as expression of both. The model is offered as generic; originally derived from but not necessarily limited to healer or spiritual development and education, or healing communities. Though in contemporary Euro-American culture the spiritual is considered a separate or separable dimension, and healing a separate or separable role, the !Kung and Fijian data describe a situation where the spiritual is inseparable from other aspects of life, as is healing. The model reflects this integrated conception and offers an integrated perspective for understanding development, education, and community in the West.

The transformational model as applied to psychological development is clarified when compared with the Piagetian model, probably the most commonly accepted theory of developmental psychology in the West.[10] For example, the spiritual dimension plays a central role in the transformational model in contrast to the focus on psychological, and especially cognitive, dimensions in the Piagetian approach.[11] That spiritual dimension is extraordinary only in its depth and intensity, not in its separation from ordinary life. It includes, in an integrative manner, the psychological and cognitive dimensions, as well as other dimensions such as the emotional and physical. The validity of the transition into an enhanced state, and the state itself, is dependent on its application within daily life.

The transformational model emphasizes transitioning rather than stages

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achieved, process and experience rather than structures. A continual process of transitioning over the life-course is viewed as the crux of development, rather than the Piagetian focus upon a linear (or spiral) progression through fixed stages which culminates in an equilibrated end-state or stage in adulthood. Unfolding like a path cut through the bush, the straight path is not a linear progression through defined levels of attainment. Life history in the transformation model becomes the continuous dialectic of meeting and being overwhelmed by one recurring developmental challenge: transcending the self to channel transpersonal resources to the community. This contrasts with the idea of different developmental challenges at different stages in the Piagetian model. Though healers have careers, and can be said to move through stages in their work, these are surface categories, which do not organize the transitioning experiences.

The process of transitioning is neither unidirectional nor the basis of permanent structural gains, unlike the developmental process in the Piagetian model. Transitioning occurs toward and away from meaning, balance, connectedness and wholeness; and each movement is considered important in and of itself -- regardless of direction -- because it deals with the basic developmental challenge of transitioning. Once a particular meaning, for example, has been achieved in a certain setting, it is not thereby permanent. Meaning is undone as meaninglessness inevitably appears and old and new meanings are established. In their continual struggle to regulate their access to and control of the healing power, healers exemplify this fluidity in the developmental process. With each opportunity for transition, knowledge of how to transit must in the existential sense be relearned with each opportunity for transition; at times it is unavailable, even to the experienced healers. The

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process of transitioning is also accompanied by a fundamental experience of vulnerability, both more frightening and liberating than the feelings of perplexity, confusion, surprise and insight which are spoken of as accompanying the developmental transitions in the Piagetian framework.

Finally, the merging of individual and social development in the transformational model contrasts with the more individualistic, even personal emphasis in Piagetian models. In the transformational model, development is a shared enterprise, a joining of self and community with unexpected benefits to both. It is a way of giving support for the difficulties of transition as well as a way of distributing the benefits released by that transitioning.

By understanding the healer as a "moral explorer," we can see evidence for this merging of individual and socio-cultural development. Fijian healers must find and stay on the "straight path." It is this continual struggle which allows the healer to contact the most profound power in Fijian life and, more important, apply that power to healing. Healers are faced with the task of defining reality in their interactions with cultural mysteries. Defining reality, they impart meaning. Imparting meaning, they make judgments about morality. None of these activities is predetermined. Though the straight path existed for many before them, all healers must find and travel the path for themselves. The community sends healers on a journey to new territories of experience, to formulate new questions of reality, meaning, and morality; and then it looks to them for guidance in these areas. In dynamic interaction with changing times, they can provide guidance for the direction of change.

The transformational model as applied to education -- "education as transformation" -- stresses character development rather than cognitive development as the critical context for knowledge (Katz 1981, 1982c, in press).

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It is qualities of heart -- courage, commitment, belief and intuitive understanding -- that open the healers to the healing potential, facilitate the learning of healing knowledge, and keep them in the healing work. Healing technologies become available to those with the necessary character. Technologies serve the healing aim, but they do not justify or measure the healing work. Character is the necessary foundation and result of developmental processes. To travel the straight path, one needs character, which can only develop fully as one travels that path. The straight path unfolds in this reflexive and reciprocating manner.

Education as transformation stresses process more than outcome, focusing on healing as a dynamic balancing rather than the achievement of specific cures. Such education respects both aspects of a dialectic that seem necessary to individual and community health (Turner, 1969; J. Rappaport, 1981). It connects experiences ordered by the structures of daily life as well as those that occur in transition between and beyond those structures. Education as transformation gives added weight to the experience to transition itself, emphasizing the intrinsic value of the psychological movement that animates that transition. The experience of the transpersonal is intensified during these transitions but not restricted to them. In a process we can call "envisioning", the experience of enhanced consciousness is continually reenacted and reaffirmed in the healers' daily lives. Transformation initiates the intensive phase of becoming a healer and also characterizes the healer's subsequent development.

Education as transformation is based upon a service orientation. The healer's commitment is to serve as a vehicle that channels healing to the community rather than to accumulate power for personal use. Education aims

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to connect the teaching-learning process to its community contexts. The cure of a particular patient assumes importance in the larger context of the general sense of dynamic balance in the community. Healers become a community's focal point of intensity, embodying a dedication to the healing work and reaffirming the community's self-healing capacities.

The transformation model as applied to community -- "synergistic community" -- is epitomized, for example, in the !Kung healing community. In a synergistic community valued resources are renewable, expanding, and accessible (Katz, 1983/84). As these resources are shared equitably with all members of the community, the whole becomes greater than the sum of the parts and what is good for one member becomes good for all. As a result, benefits to the community grow exponentially.

Synergy and scarcity represent paradigmatic alternatives, two ends of a continuum which in actual situations exist in some combination (Katz, 1983/84). What might be called a "scarcity paradigm" dominates Western thinking about the existence and distribution of a wide variety of resources. The paradigm assumes that valued resources are scarce; their presumed scarcity in fact largely determines their value. It further assumes that individuals or communities must compete with each other to gain access to these resources, struggling to accumulate their own supply, resisting pressures to share.[12]

An alternative paradigm is based on synergy. The term synergy describes a pattern of relationships among phenomena, including how people relate to each other and other phenomena (Fuller, 1963; Benedict, 1970; Maslow, 1971; Katz, 1982b). A synergistic pattern exists when phenomena are interrelating so that an often unexpected, new and greater whole is created from disparate, seemingly conflicting parts. In that pattern, phenomena exist in harmony with

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each other, maximizing each others' potential. Within the synergy paradigm, a resource such as healing becomes renewable and expansively accessible, yet it can remain valuable (Katz, 1981, Note 1).[13] Individuals and communities activate resources. They function as guardians, not possessors of resources, and while guided by the motivation of service to others, they allow resources to be shared by all members of the community. Greater amounts of the resource become increasingly available to all, so that collaboration rather than competition is encouraged. Paradoxically, the more the resource is utilized, the more there is to be utilized.

Synergistic community is a perspective for understanding the functioning of synergy within a community as well as a guideline for increasing that synergy (Katz, 1984).[14] If, for example, healing is a valued resource for a community, the existence of a synergistic community would mean that that resource would expand and become renewable. The community would heal and become healed.

Synergistic community is initiated when members experience an enhancement of consciousness. As the boundaries of self become more permeable to the spiritual dimension, a transpersonal bonding between people can occur so that individuals realize and activate communal commitments. As persons "die to" or go beyond their individual needs, sharing of resources becomes possible, even predictable. Realizing their deep connectedness, persons realize they do not have to compete for resources, which have become shared and thereby expanding.[15] Synergistic community is established by the full transformational experience.

The transformational experience is based on access to and working with a resource which is highly valued in the culture and is also renewable and

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expanding when activated -- for example, n/um for the !Kung, mana for the Fijians. Transformation itself activates that resource. Given it. socio-culture context, transformation releases that resource -- now in the form of healing -- to the community, making it accessible to all. A reciprocating web of valued resources becomes renewable and shared -- for example, the n/um or mana is released in the process of healing which stimulates and expresses developmental processes so that access to n/um or mana is facilitated.

The recurring developmental challenge is on behalf of one's community and the benefits channeled to that community, whether or not the challenge is met. In either case the community shares in the process of transitioning, supporting the healer's movement back and forth as it itself so moves. As one healer makes the transition, it becomes more likely that another will; it is not a zero-sum game, but a situation of renewable and expanding resources. The !Kung healing dance exemplifies this -- healers, by their own !kia, stimulate !kia in others. In synergistic fashion, effects are produced which are far beyond what is possible from separate actions.[16]

The transformational model we have just presented has been deduced from the field data on !Kung and Fijian community healing systems. But to what extent is this model culture-dependent, embedded in specific demographic, economic, technological and other socio-cultural conditions? The general validity of the model awaits further empirical work in other cultures. How valid is transformation as a paradigm for the process of psychological healing, and in particular for healer development and education and healing communities? How valid is healing as a paradigm for generic processes of development, education and community? A first step in this empirical effort demonstrates that "education as transformation" characterizes healer education

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among hunter-gatherers (Hahn and Katz, in press).

Despite the provisional nature of the proposed transformational model, its striking contrast with Euro-American models deserves comment. Transformational experiences are relatively absent in Euro-American models. These transformational experiences, epitomized in the healing transitioning, take individuals beyond the self and take communities beyond the usual boundaries of social organization. The result is a network of interconnections between individuals and within communities that makes sharing of resources a simple fact of living. The absence of such transformational experiences makes such sharing difficult, in spite of human motivation and intention.

Compelling arguments document the necessity of sharing, as well as other characteristics of the transformational model for the survival of the human community (see e.g. Caplan and Killilea, 1976; Eliade, 1965; Jung, 1952; Lee, 1979; Light, 1980; Maslow, 1971;Rappaport, 1978; J. Rappaport, 1981; Sarason, 1977). There is for example the need to appreciate the non-linear oscillation about a recurring central developmental issue rather then the relative Euro-American preoccupation with linear, "progressive" models of development; the need to focus on character and community service in education rather than the relative Euro-American emphasis on technical training in isolation from character and on the personal accumulation of skill and power; and the need to view resources as renewable and expanding rather than the relative Euro-American orientation that valued resources are scarce, requiring competition to access them.

From the perspective of most contemporary Euro-American communities, establishing a synergistic community would require a radical paradigm shift -- a major shift in the way persons experience meaning and interpret data (Kuhn,

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1970). Accepting, even cultivating a sense of vulnerability, would create the possibility for such a shift (Katz, in press). Experiencing the self-embedded-in community as a desirable state, along with the sense of the separate and separating self, would be one result. In a synergistic community, self and community work toward the common good while seeking to fulfill their own perceived needs. As healing is given, more rather than less becomes available. These apparently "illogical" events can be accepted or even encouraged when the synergy paradigm prevails. If change is to occur and persist, socio-political structures which initiate and express these new ways of making sense of experience must be established.

R. Rappaport (1978) suggests that rituals in which we experience a transpersonal bonding are essential for the survival for the species. He claims that only through participating in such rituals can we overcome our separateness as individuals and, by knowing the reality of the transpersonal, become able to accomplish the communal tasks so essential to the survival of the human community. The present individualism and consequent fragmentation of these communal efforts in industrialized society is well documented (Berger, Berger and Kellner 1973). The transformational model offers an alternative to this fragmentation, stressing a transpersonal bonding within a supportive socio-cultural context.

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FOOTNOTES

1. I want to thank Michael Murphy, Linda Levine, Susan Pollak, Becka Reichmann and ~~Corky~~ Merry White for their helpful comments, generously offered.

2. The terms "transformation" and "transformational" have wide usage in the social sciences (see e.g. Gould, 19 ; Harvard Educational Review, 1981; Jung, 1952). But rather than working within a strictly comparative framework, I wish to devote this paper to generating a particular meaning constellation for the terms, and for the purposes of the paper, restrict the terms to those developed meanings.

Among the !Kung and Fijians, and in most traditional non-Western cultures, there are no significant differentiations between "physical" and "psychological" healing. But I have chosen the term "psychological healing" when dealing with the transformational model extracted from that data because the main application of that model in this paper will be to contemporary Euro-American thinking and practice, where such differentiations remain crucial. Assuming the validity of those distinctions, the model proposed would be more relevant to the psychological and socio-cultural context of health and illness than e.g. the specific issues of tissue damage and repair. Yet this conservative stance may soon be unnecessary, as evidence is increasing within Western social science and medicine for the confluence of the psychology and physical elements of healing (see e.g. Sobel, 1979).

3. Healing systems are among those parts of a culture most sensitive to change. Dealing as they do with points of crisis, confusion, and opportunity--transitions which are the essence of cultural change--healing systems often function as the barometers of, as well as the responses to, such change. Therefore the study of healing could be focusing upon patterns of adaptation to change, perhaps even upon aspects of the culture which are most changed.

4. Contemporary hunter-gatherers or foragers are different from ancient foragers, changed as they are by their own history, which includes contact with other types of societies. Also, there are differences among contemporary foragers, such as the !Kung, the Inuit, and the Australian aboriginal (Lee, 1979). Yet the !Kung remain one of the few living groups whose life style may be similar to that ancient foraging way:

> The modern foragers do offer clues to the nature of the [foraging] way of life, and by understanding the adaptations of the past we can better understand the present and the basic material that produced them both (Lee, 1979, p. 433).

5. The research on healing was part of the larger Harvard Kalahari Research Project (Lee and DeVore, 1976).

6. Significant psychological differences were based on T.A.T. and Draw-a-Person test findings. Due to the small sample size and lack of longitudinal data, it was not possible to pinpoint the exact degree to which these differences were preexisting conditions, influencing the selection of

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healers, and/or were effects of the healing practice itself.

7. Yaqona's botanical identification is Piper methysticum. It is widely used in the South Pacific, and is also called "kava kava."

8. There are a variety of traditional healers. The type we are considering is called a dauvagunu; they can be considered as spiritual healers in distinction to the herbalists and massage specialist. Spiritual healers treat the broadest range of problems as well as the most severe; sicknesses with a spiritual etiology are their special province.

9. !Kung egalitarian social structure, with its emphasis on sharing, ensures that n/um is applied as healing which is distributed throughout the community. Therefore there is a relative emphais in the !Kung data on accessing the enhanced state of consciousness. Fijian social structure cannot so clearly ensure that mana is applied to healing and distributed throughout the community. Therefore there is a relative emphasis in the Fijian data on applying the enhanced state toward healing in the community.

10. Piaget's focus is on intellectual development and the development of moral reasoning, and thus has limitations as a general theory of development for the whole person. But other theorists have extended the Piagetian frameworkto such areas as social development (Selman, 1980), faith development (Fowler, 1982) and community development (Higgins et al., 1984). Our discussion of the Piagetian model is based upon this broader conception of the Piagetian model.

The transformational model can be particularly confusing at this point because some of those working within the Piagetian framework use the term "transformation" to refer to processes which are different from those described in this paper.

11. Fowler's (1982) work considers the influence of spiritual factors throughout development. But it is not until the final stage in his theory, "Universalizing Faith," that he deals with a spiritual influence as direct and pervasive as that which occurs in the transformational model of development. Even then, Fowler's Universalizers are rare and often exist at odds with their culture, in contrast to the spiritual dimension of the transformation model which is consonant with cultural context.

12. The relation of actual scarcity of particular resources to cooperation or competition remains an empirical question. The relationship may differ according to the resource in question as well as the social structure governing access to and control of that resource. Water is a scarce and valued resource for the !Kung people of the Kalahari Desert, while building materials for their shelters are a plentiful and valued resource. Both resources are shared among the !Kung (Lee, 1979).

13. It can be argued that resources created at least in part by human activity and intention, such as healing, are instrinsically expanding and renewable. Yet the scarcity paradigm can dominate the generation and distribution of these human resources. In most Western psychotherapy

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techniques, healing is seen as existing in scarce supply. Value, expressed in varying fee schedules, becomes entrained to scarcity. People are forced to compete with each other for their share of healing. Here the scarcity paradigm seems to function more as an ideology than an empirically-derived framework.

14. Synergy, it seems, is an inevitable aspect or phase of community. It exists in a dialectical relationship with its opposite. Most Euro-American communities function primarily within the scarcity paradigm, but they require moments of synergy in order to remain intact. Synergistic community refers both to the phase of synergy that is intrinsic to community, and those particular communities in which there is relatively more synergy. But community cannot always function synergistically. In Turner's (1969) framework, anti-structure cannot exist without structure.

15. Synergistic community can exist even though its members are not altruistic, i.e. intentionally wishing to share or to help others. Sometimes the structure of synergistic communities is the dominant feature, overriding individual motivations. Members can act out of what they perceive as their own best, even individual interests, but the structure makes what is good for one, good for all.

16. An important source for concepts of community in contemporary Western culture, as well as for strategies of introducing community change, is the discipline of "community psychology." (Caplan, 1964; Caplan and Killilea, 1976; Rappaport, 1981; Sarason, 1977). ~~As an outgrowth of Euro-American social sciences~~, Community psychology operates primarily within scaracity paradigm thinking; its view of community is in sharp contrast to that of synergistic community. For example, community psychology assumes there is an inherent conflict between the individual and the community because resources are insufficient to satisfy both; often one is satisfied at the expense of the other. The inability of community psychology to fulfill its mandate to encourage individual and community change may be due in part to its commitment to the scarcity paradigm.

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REFERENCES

Benedict, R. (1970). Synergy: Patterns of the good culture. American Anthropologist, 72, 320-333.

Berger, P. L., & Neuhaus, R. J. (1977). To empower the people: The role of mediating structures in public policy. Washington, DC: American Enterprise Institute for Public Policy Research.

Bourguignon, E. (1979). Psychological anthropology. New York, NY: Holt, Rinehart and Winston.

Caplan, G. (1964). Principles of preventive psychiatry. New York, NY: Basic Books.

Caplan, G., & Killilea, M. (Eds.). (1976). Support systems and mutual help. New York, NY: Grune & Stratton.

Carp, J. (1981). Youth's need for social competence and power: The community building model. Adolescence, 64, 935-951.

Durkheim, E. (1968). The elementary forms of religious life. New York, NY: Free Press.

Eliade, M. (1965). Rites and symbols of initiation. New York, NY: Harper & Row.

Erickson, E. (1964). Childhood and society. New York, NY: Norton.

Firth, R. (1940). The analysis of 'mana': An empirical approach. Journal of the Polynesian Society, 40, 483-510.

Fogelson, R., & Adams, R. (Eds.). (1977). The anthropology of power: Ethnographic studies from Asia, Oceania and the New World. New York, NY: Academic Press.

Fowler, J. (1981). Stages of faith: Psychology of human development and the quest for meaning. New York: Harper and Row.

Frank, J.D. (1973). Persuasion and healing. Baltimore,Md.: Johns Hopkins University Press.

Freire, P. (1970). Cultural action for freedom. Harvard Educational Review, Monograph Series No. 1.

Fuller, B. (1963). Ideas and integrities. New York, NY: Macmillan, Collier Books.

Gould, R. ( ). Transformation??

Hahn, H., & Katz, R. (1984). Education as transformation: A test of the model. Harvard University, unpublished mss.

BEST COPY AVA

Harvard Educational Review (1981). Education as transformation (Special Issue), 51(1).

Higgins, A.; Power, C.; and Kohlberg, L. (1984). The relationship of moral atmosphere to judgements of responsibility. In W. Kurtines and J. Gewirtz (eds.) Morality, moral behavior, and moral development. New York: John Wiley and Sons.

James, W. (1958). The varieties of religious experience. New York, NY: Mentor Books.

Jung, C. (1952). Transformation. Princeton: Princeton University Press.

Jung, C. (1972). Two essays on analytical psychology. Princeton: Princeton University Press.

Katz, M.M.W. (1981). Gaining sense at age two in the outer Fiji Islands: A cross-cultural study of cognitive development. Doctoral Dissertation, Harvard University.

Katz, R. (1981). Education as transformation: Becoming a healer among the !Kung and Fijians. Harvard Educational Review, 51(1), 57-78.

Katz, R. (1982a). Accepting "Boiling Energy": Transformation and healing. Ethos, 10(4), 344-368.

Katz, R. (1982b). Boiling energy: Community healing among the Kalahari Kung.. Cambridge, MA: Harvard University Press.

Katz, R. (1982c). Commentary on "Education as Transformation." Harvard Educational Review, 52(1), 63-66.

Katz, R. (1982d). The utilization of traditional healing systems. American Psychologist, 37(6), 715-716.

Katz, R. (1983/4). Empowerment and synergy: Expanding the community's healing resources. Prevention in Human Services (Special Issue on Empowerment), 3.

Katz, R. (in press). Synergistic community: Towards expanding educational resources, Harvard Educational Review.

Katz, R., & Kilner, L. (in press). The "straight path": A Fijian perspective on development. In C. Super & S. Harkness (eds.), Studies in Comparative Human Development. New York: Academic Press.

Kuhn, T.S. (1970). The structure of scientific revolutions. (2nd ed., enlarged). Chicago, IL: The University of Chicago Press.

Lee, R.B. (1968). The sociology of !Kung Bushman trance performances. In R. Prince (ed.), Trance and possession states. Montreal, Canada: Bucke Memorial Society.

BEST COPY AV

Lee, R.B. (1972). The Bushmen of Botswana. In M. G. Bicchieri (Ed.), Hunters and gatherers today. New York, NY: Holt, Rinehart, & Winston.

Lee, R.B. (1979). The !Kung San: Men, women and work in a foraging society. Cambridge University Press.

Lee, R.B., & DeVore, I. (Eds.). (1968). Man the hunter. Chicago, IL: Aldine.

Lee, R.B., & DeVore, I. (1976). Kalahari hunter-gatherers: Studies of the !Kung San and their neighbors. Cambridge, MA: Harvard University Press.

LeVine, R. (1979). Culture, behavior and personality (2nd ed.). Chicago, IL: Aldine.

Levi-Strauss, C. (1963). Structural anthropology. New York:Basic Books, 1963.

Light, D. (1980). Becoming psychiatrists: The professional transformation of the self. New York, NY: W. W. Norton and Co.

Marshall, L. (1969). The medicine dance of the !Kung Bushmen. Africa, 39, 347-381.

Marshall, L. (1976). The !Kung of Nyae Nyae. Cambridge, MA: Harvard University Press.

Maslow, A. (1971). Tthe farther reaches of human nature. New York, NY: Viking Press.

McClelland, D. (1975). Power: The inner experience. New York, NY: Irvington.

Nayacakalou, R. (1975). Leadership in Fiji. Oxford, England: Oxford University Press.

Nayacakalou, R. (1978). Tradition and change in the Fijian village. Suva, Fiji: University of the South Pacific.

Press, I. The urban curandero. In D. Landy (Ed.), Culture, disease and healing: Studies in medical anthroplogy. New York: Macmillan, 1977.

Rappaport, J. (1981). In praise of paradox: A social policy of empowerment over prevention. American Journal of Community Psychology, 9(1), 1-25.

Rappaport, R. (1978). Adaptation and the structure of ritual. In N. Blurton-Jones & V. Reynolds (Eds.), Human behavior and adaption, 18. New York, NY: Halsted Press.

Rappaport, H., & Rappaport, M. (1981). The integration of scientific and traditional healing: A proposed model. American Psychologist, 36,

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Ravuvu, A. (1976). Fijian religion. Unpublished manuscript, University of the South Pacific.

Sahlins, M. (1962). Moala: Culture and nature on a Fijian Island. Ann Arbor, MI: University of Michigan Press.

Sarason, S. (1977). The psychological sense of community: Prospects for a community psychology. San Francisco, CA: Jossey-Bass.

Scheff, T.J. (1971). Being mentally ill: A sociological theory. Chicago, IL: Aldine.

Selman, R. (1980). The growth of interpersonal understanding: Developmental and clinical understanding. New York: Academic Press.

Shweder, R. (1977). Likeness and likelihood in everyday thought: Magical thinking in judgments about personality. Current Anthropology, 18, 637-658.

Sobel, D. (ed) (1979). Ways of health. New York: Harcourt Brace Jovanovich.

Spencer, D. (1941). Disease, religion and society in the Fiji Islands. New York, NY: Augustin.

Tambiah, S. (1973). Form and meaning of magical acts: A point of view. In R. Horton & R. Finnegan (eds.), Separate from modes of thought. London: Farber.

Tart, C. (Ed.) (1969). Altered states of consciousness: A book of readings. New York, NY: Wiley.

Thompson, L. (1940). Southern Lau, Fiji: An ethnograph. Honolulu, HI: Bishop Museum.

Turner, V. (1969). The ritual process. Chicago, IL: Aldine.

Van Gennep, A. (1960) The rites of passage. Chicago: University of Chicago Press.

BEST COPY AVA